

Linda J Pietz
Director of Curriculum,
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INTENT TO APPLY FOR GRANT FUNDING

Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

Date:9/23/22	Contact Person:	Jolene Konechne	
Group Applying:Pre	school Partnership Program		
Name of Grant/Award:\	VINGS Foundation		
Name of Funder:WINGS	Contact Person	nDawn Mutchelknaus	
Amount to be Requested:	\$4,000 Funder's Submis	sion Due Date:_ongoing	
Project Focus: Tuition assista DSS.	nce to preschool-aged children	who have been identified thr	rough Head Start, HSD, or
How awarded amount receive	d?xx Full am	ount up front	Reimbursement
Are any follow up reports req	uired? Yesxx No	If yes, when are they due?	
Is any District funding, resour	ce, or in-kind commitment req	uired now or in the future?	YesNo_xx
If yes, please list by dollar an	nount and/or in-kind service/su	upport. Please be specific.	
 process unless other a A copy of the comple The person or group a If and when the 	will be responsible for submit rrangements have been made. eted grant application must oplying will need to submit the e grant is awarded, a copy of to reports are required, a copy	be available upon request. following documentation to he award letter.	*
A copy of this request with si	gnatures will be returned to th		the application is reviewed
Signature: Building/Depart	allowing the applic	9/23/2022	
Signature: Linda	ment Administrator	Date 9/23/32 on & Assessment Date	
Signature: Kelly Christophe	rsor, Business Manager	9-23-2) Date	
Presented to School Board: _			